## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000002065

Entity Name: LIMELIGHT PRODUCTIONS OF NAPLES INC.

FILED Apr 20, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3399 GULF SHORE BLVD N SUITE 603 58 BAY POINTE DRIVE EXT

NAPLES, FL 34103 BUZZARDS BAY, MA 34103 US

Current Mailing Address: New Mailing Address:

3399 GULF SHORE BLVD N SUITE 603 P. O. BOX 616

NAPLES, FL 34103 BUZZARDS BAY, MA 02532 US

FEI Number: 20-2325344 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HOUTON, JOHN F KIMIJAN, JAN D

3399 GULF SHORE BLVD N SUITE 603 2697 POINCIANA DRIVE NAPLES, FL 34103 US NAPLES, FL 34105 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JAN KIMIJAN 04/20/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: D ()Delete Title: D (X)Change ()Addition

 Name:
 KIMIJAN, JAN
 Name:
 KIMIJAN, JAN D

 Address:
 2697 POINCIANA DR
 Address:
 2697 POINCIANA DR

 City-St-Zip:
 NAPLES, FL 34105
 City-St-Zip:
 NAPLES, FL 34105

 Title:
 D
 ( ) Delete
 Title:
 D
 (X) Change ( ) Addition

 Name:
 DOOLEY, WILLIAM
 Name:
 DOOLEY, WILLIAM D

 Address:
 538 9TH AVENUE SOUTH
 Address:
 538 9TH AVENUE SOUTH

 City-St-Zip:
 NAPLES, FL 34102
 City-St-Zip:
 NAPLES, FL 34102

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$ 

Name:HOUTON, JOHN FName:HOUTON, JOHN F DAddress:3399 GULF SHORE BLVD N SUITE 603Address:58 BAY POINTE DRIVE EXTCity-St-Zip:NAPLES, FL 34103City-St-Zip:BUZZARDS BAY, MA 02532

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN F. HOUTON D 04/20/2007